

[illegible]

Application Information

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Method and Apparatus for Resource Allocation in Network Router and Switch 16869B-018700US
Attorney Docket Number::	
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	8
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Satoshi
Middle Name::	
Family Name::	Yoshizawa
Name Suffix::	
City of Residence::	Saratoga
State or Province of Residence::	CA
Country of Residence::	
Street of Mailing Address::	12309 Obrad Drive
City of Mailing Address::	Saratoga
State or Province of mailing address::	CA
Country of mailing address::	
Postal or Zip Code of mailing address::	95070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Daisuke
Middle Name::
Family Name:: Matsubara
Name Suffix::
City of Residence:: Santa Clara
State or Province of Residence:: CA
Country of Residence::
Street of Mailing Address:: 1504 Vista Club Circle, #303
City of Mailing Address:: Santa Clara
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 95054

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Kenichi
Middle Name::
Family Name:: Otsuki
Name Suffix::
City of Residence:: Santa Clara
State or Province of Residence:: CA
Country of Residence::
Street of Mailing Address:: 3101 Tasman Drive, #140
City of Mailing Address:: Santa Clara
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 95054

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	27,431	Robert C. Colwell
Associate		
Associate		

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

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